Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. 1.136(a) 29195-8115US In re Application of **Daniel Woodruff Application Number** E/002/13/2001 09/782.216 **16**LUDING A PROCESSING APP REACTOR FOR ELECTROCHEMICALL MICROELECTRONIC WORKPIECE Group Art Unit Examiner 1753 Brian L. Mutschler This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate non-small-entity fee are as follows (check time period desired): One month (37 CFR 1.17(a)(1)) 110 Two months (37 CFR 1.17(a)(2)) 420 Three months (37 CFR 1.17(a)(3)) 950 Four months (37 CFR 1.17(a)(4)) \$ 1.480 Five months (37 CFR 1.17(a)(5)) \$ 2,010 Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 50-0665. I have enclosed a duplicate copy of this sheet. 12/11/2003 MMEKONEN 00000048 09782216 applicant/inventor I am the 110.00 OP assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a): WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. December 8, 2003 Date Signature 206-359-8000 John M. Wechkin Telephone Number Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit

☐ Total of 1 forms is submitted.

multiple forms if more than one signature is required, see below.